

AMENDED IN SENATE APRIL 12, 2012

SENATE BILL

No. 1487

Introduced by Senator Hernandez

February 24, 2012

An act to ~~amend Section 14105.986 of~~ *add Section 14005.27* to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

SB 1487, as amended, Hernandez. Medi-Cal: ~~disproportionate share hospitals: children's hospitals: eligibility: former foster youths.~~

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which health care benefits are provided to qualified low-income individuals. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. ~~Existing law authorizes a children's hospital that holds a consolidated license, as specified, to be evaluated for eligibility for Medi-Cal payment adjustment amounts under a disproportionate share list using data related to all physical plants appearing on the consolidated license. For purposes of calculating the appropriate amount of the payment adjustment, existing law requires the department to use data relating only to the children's hospital or any other physical plant appearing on the consolidated license that is not more than 15 miles from the children's hospital.~~

~~This bill would make technical, nonsubstantive changes to those provisions, to the extent federal financial participation is available and to the extent required by federal law, extend Medi-Cal eligibility, including eligibility for the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, to youths who were formerly in foster~~

care and who are under 26 years of age, pursuant to prescribed provisions of federal law.

Because each county is responsible for making Medi-Cal eligibility determinations, by expanding Medi-Cal eligibility the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~-yes.
State-mandated local program: ~~no~~-yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14005.27 is added to the Welfare and
2 Institutions Code, to read:

3 14005.27. (a) To the extent federal financial participation is
4 available and to the extent required by federal law, the department
5 shall extend Medi-Cal eligibility, including eligibility for the Early
6 and Periodic Screening, Diagnosis, and Treatment (EPSDT)
7 Program, to youths who were formerly in foster care and who are
8 under 26 years of age, pursuant to the federal Patient Protection
9 and Affordable Care Act (Public Law 111-148), as amended by
10 the federal Health Care and Education Reconciliation Act of 2010
11 (Public Law 111-152).

12 (b) The department may implement this section by adopting
13 regulations in accordance with the requirements of Chapter 3.5
14 (commencing with Section 11340) of Part 1 of Division 3 of Title
15 2 of the Government Code.

16 SEC. 2. If the Commission on State Mandates determines that
17 this act contains costs mandated by the state, reimbursement to
18 local agencies and school districts for those costs shall be made
19 pursuant to Part 7 (commencing with Section 17500) of Division
20 4 of Title 2 of the Government Code.

21 ~~SECTION 1. Section 14105.986 of the Welfare and Institutions~~
22 ~~Code is amended to read:~~

1 ~~14105.986.— (a) A children’s hospital as defined in Section~~
2 ~~10727 that holds a consolidated license issued pursuant to~~
3 ~~subparagraph (C) of paragraph (4) of subdivision (b) of Section~~
4 ~~1250.8 of the Health and Safety Code may be evaluated for~~
5 ~~eligibility for payments under subdivision (c) of Section 14105.98~~
6 ~~no earlier than January 1, 2000, using data related to all physical~~
7 ~~plants appearing on the consolidated license. For purposes of~~
8 ~~calculating the appropriate amount of the payment adjustment~~
9 ~~under subdivision (l) of Section 14105.98 for these children’s~~
10 ~~hospitals, the department shall use data relating only to the~~
11 ~~children’s hospital or to another physical plant appearing on the~~
12 ~~consolidated license that is not more than 15 miles from the~~
13 ~~children’s hospital, and shall exclude data relating to a physical~~
14 ~~plant added to the consolidated license pursuant to subparagraph~~
15 ~~(C) of paragraph (4) of subdivision (b) of Section 1250.8 of the~~
16 ~~Health and Safety Code.~~

17 ~~(b) The department shall not implement this section unless all~~
18 ~~of the following occur:~~

- 19 ~~(1) Federal financial participation is available.~~
20 ~~(2) The federal Centers for Medicare and Medicaid Services~~
21 ~~approves a state plan amendment to implement this section.~~
22 ~~(3) All data necessary to complete the evaluations and~~
23 ~~calculations required by subdivision (a) are provided to the~~
24 ~~department from the same sources described in Section 14105.98~~
25 ~~and in the approved state plan existing on July 1, 1998. In no event~~
26 ~~shall data directly provided by a children’s hospital be utilized for~~
27 ~~these evaluations and calculations.~~